

A Guide To The

# **NIH ACQUISITION PROCESS**



## **PREFACE**

This is a general guide to assist potential contractors not familiar with the National Institutes of Health (NIH) acquisition program. It answers questions most often asked, for example, how to learn of NIH plans to award a contract, how to submit proposals, how proposals are evaluated, etc.

Besides providing information on the initiation, award and administration of contracts sponsored by the components of the NIH, this guide includes a discussion of the distinctions between acquisition and assistance.

Note that several NIH acquisition offices use Simplified Acquisition Procedures for purchases under the simplified acquisition threshold of \$100,000 and commercial items up to \$5,000,000. Acquisitions of this type include, but are not limited to purchase orders, record of call orders, and ordering from General Services Administration schedules. This guide will not discuss acquisitions using the simplified acquisition procedures.

The material in this guide is subject to revision by statute, regulation, or through the decision-making processes. Therefore, this guide should be used only as a general reference and not considered all-inclusive or authoritative. It is not intended to replace the Federal Acquisition Regulation (FAR) or the terms of any particular contract.

It is our expectation that the guide will be revised periodically to meet developing needs. Within these limits, we hope that the guide will prove beneficial to the reader. We welcome suggestions for improvement of the NIH acquisition program and hope that all NIH contractors or potential contractors will not hesitate to communicate with us. Readers also should note that a WEB Home Page for the Office of Acquisition Management and Policy is accessible at <http://ocm.od.nih.gov/>.

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Head of the Contracting Activity and  
Director, Office of Acquisition Management and Policy, OA

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## **PART I**

### **GENERAL INFORMATION ABOUT THE NIH ACQUISITION PROCESS**

The NIH is the principal health research component of the Department of Health and Human Services (DHHS). Its mission is to uncover knowledge that will lead to better health for all Americans. The NIH partly accomplishes this mission by supporting and conducting both basic and applied behavioral and biomedical research in its own facilities. In addition, it supports or acquires scientific investigations and developmental efforts performed by other organizations through acquisition (contracts) and assistance (grants and cooperative agreements).

Apart from its research mission, the NIH conducts non-Research and Development (R&D) acquisitions to provide general supplies and services, construction, and Information Technology resources.

#### **1. Distinctions Between Contracts as Acquisition Instruments, and Grants and Cooperative Agreements as Assistance**

There are fundamental distinctions between acquisition and assistance arrangements. A contract is a legal instrument used to reflect a relationship between the Federal Government and the recipient whenever the principal purpose of the transaction is to acquire goods or services for the direct benefit or use of the Government. Generally, the Government states the work to be undertaken or the problem to be solved in Requests for Proposals (RFPs), or Invitations For Bids (IFBs). Respondents compete for a common requirement open to all offerors/bidders. Proposals are evaluated using technical and business evaluation criteria and the process usually involves negotiations to determine the best value to the Government. Bids are awarded to responsible, responsive bidders considering only price and price-related factors.

Unsolicited proposals to perform original, unique, and innovative concepts are an exception to competitive solicitations initiated by the Government and are described in Part II, Section 9.

Grants and cooperative agreements are financial assistance mechanisms whereby money and/or direct assistance is provided to carry out approved activities. A grant is used whenever the awarding office anticipates no substantial programmatic involvement with the recipient during performance of the financially assisted activities. A cooperative agreement is used when substantial Federal programmatic involvement with the recipient is anticipated during performance.

## **2. NIH Contract-Awarding Organizations**

The NIH comprises a number of separate Institutes and Centers (ICs) in which the acquisition functions are carried out. The NIH product or supply acquisitions range from basic office, medical, and information technology supplies and equipment to sophisticated state-of-the-art biomedical equipment and systems. The NIH service acquisitions include construction, management consulting, and complex biomedical R&D such as clinical trials. This broad range of acquisition provides the necessary support for the NIH to carry out its mission. The responsibility for negotiating, awarding and administering these acquisitions lies with the various IC contracting staff and one central organization, the Office of Logistics and Acquisition Operations (OLAO). NIH acquisitions are under the cognizance of the Head of the Contracting Activity (HCA), Director, Office of Acquisition Management and Policy (OAMP).

## **3. The Role of the Contracting Officer**

An officially appointed Contracting Officer is the exclusive agent of the Government and is the only person empowered to execute or modify a contract on behalf of NIH or any of its component ICs. Contracting Officers may act through their authorized representatives, generally referred to as Contract Specialists, in other matters that do not involve the actual execution of contract instruments. Contracting Officers are assigned to the various NIH organizations listed in Appendix A.

## **4. The Role of the Contract Project Officer**

A Government Project Officer experienced in the scientific and technical disciplines addressed in a particular program or project is appointed for each awarded contract. The Project Officer is responsible for monitoring the technical aspects of the project and assisting the Contracting Officer in the administration of the contract. The Project Officer has a primary relationship with the Contractor's Program Manager. The Project Officer monitors the contractor's technical progress and assists in the resolution of technical problems encountered during performance.

## **5. Regulations Governing Contracting**

The Federal Acquisition Regulation (FAR), and the Health and Human Services Acquisition Regulation (HHSAR) govern all NIH contracts. The FAR is on the GSA web site <http://www.arnet.gov/far/>. The HHSAR is on the HHS web site <http://www.hhs.gov/ogam/oam/procurement/hhsar.html>.

The FAR contains regulations and prescribed acquisition policies and procedures that are followed by all agencies of the Government in the solicitation, selection, negotiation, award and administration of their contracts. The HHSAR implements and supplements the FAR and provides DHHS-wide policies, procedures and guidance.

## **PART II**

### **THE ACQUISITION PROCESS**

#### **1. Methods of Contracting**

There are two basic methods of contracting used throughout the Government: negotiation and sealed bidding. The NIH requirements for R&D employ the negotiated method of contracting. Non-R&D contracts use both contracting by negotiation and sealed bidding.

Negotiation is a procedure that includes the receipt of proposals from offerors, allows discussion, and usually affords offerors an opportunity to revise their offers before award of a contract. This method provides the contracting parties maximum flexibility to refine the contract Work Statement, and to establish and agree on anticipated costs of performance.

Sealed bidding procedures are used whenever the supplies or services required can be described in precise terms. An award is made to the responsible bidder whose bid, conforming to the IFB, will be most advantageous to the Government, considering only price and price-related factors included in the IFB.

Sealed bidding procedures are more appropriate for the acquisition of construction and standard commercial goods and services. Negotiation is a more suitable method to procure R&D and other services.

#### **2. Flexibility of NIH Contracts**

The NIH terms and conditions for negotiated contracts are flexible enough to meet changing requirements as work progresses. The contract instrument provides the mechanisms for the Contracting Officer and the contractor to agree to changes in the Work Statement, expansion or reduction of work requirements within the general scope of the contract. Cost-reimbursement type contracts are subject to funding adjustments during the life of the agreement.

Many NIH R&D contract programs are announced to the scientific community by stating the research requirements in general terms. By doing so, the Government allows offerors to propose innovative solutions to the technical problems identified by the NIH.

#### **3. Contract Performance Periods**

The duration of a contract will vary depending on the requirement, from days or months for some non-R&D contracts (for example, supplies), to several years for complex R&D contracts.

For some multi-year contracts, options are used. Here the amounts for all potential years of a contract are negotiated before award, but only the first year is funded. All succeeding years are included in the contract as options that may be unilaterally exercised by the Government.

#### **4. Competition for Contracts**

The NIH competitively solicits proposals and bids to the maximum practicable extent. Depending on the nature of the requirement, the NIH encourages competition among qualified educational institutions, nonprofit and commercial organizations, which include small, small disadvantaged, women, veteran, service-disabled and hubzone-owned business firms.

#### **5. Requests for Proposals and Invitations for Bids**

The RFPs/IFBs solicitations contain all information necessary for offerors or bidders to prepare proposals or bids and where required, follow the uniform contract format established by the FAR. An RFP/IFB is made available to all sources that are known to be interested in performing a proposed requirement.

A solicitation provides the: (1) statement of work; (2) performance or delivery schedule; (3) Government-furnished property, if any; (4) contract clauses to be included in the award, and if appropriate; (5) criteria that will be used by the Government to evaluate the proposals. An RFP also includes guidance to prospective offerors on how to prepare the technical and cost portions of their proposals.

The RFPs/IFBs always specify the required date for submission of offers or bids, allowing sufficient time to prepare and submit responses. All proposals or bids must be submitted in a manner to ensure timely receipt by the Government at the exact location and on or before the deadline specified in the RFP/IFB. The NIH is not authorized to consider late proposals or late modifications to proposals, unless receipt was delayed due to one of the regulatory exemptions stated in FAR 14.304 and FAR 15.208, or all the requisite conditions exist to use the alternate late proposal procedure authorized by HHSAR 352.215-70.

Negotiated statements of work presented in the solicitations usually are flexible enough to give offerors reasonable discretion to provide their own approaches to the contract objectives, but specific enough to ensure that offerors are competing on a common basis. A uniform standard is used to evaluate the differing approaches to the requirement. This standard embodies the evaluation criteria described in the RFP.

## 6. Publicizing Contract Requirements

Federal Business Opportunities (FedBizOpps), is the single point of entry for all Government acquisitions exceeding \$25,000 and the principal source to learn of planned NIH contract projects. It is the NIH policy to seek competition in its acquisition programs to the greatest extent possible. Noncompetitive contracts are awarded on an exception basis only. Announcing competitive solicitations in the FedBizOpps provides a wide distribution of the NIH requirements to interested parties and potential contractors who may submit proposals in response to announcements of the RFP availability.

Besides announcing proposed contract projects in the FedBizOpps, the NIH also may use the *NIH Guide for Grants and Contracts (Guide)* for its R&D requirements. It contains policy guidance and administrative information about the NIH programs as well as the RFP announcements.

FedBizOpps maintains an e-mail acquisition notification service for presolicitation, solicitation and postaward notices. Registration is available through its web site <http://www.FedBizOpps.gov>. Requests to be placed on a LISTSERV to receive the *Guide* may be sent to <http://grants.nih.gov/grants/guide/index.html>.

The NIH maintains a Home Page as a third method of announcing and making RFPs available to the public. This may be accessed at <http://www.nih.gov/>. The *Guide*, as well as the RFPs issued by many NIH ICs, may be accessed at the NIH Home Page address. RFPs posted electronically can be downloaded onto a personal computer.

## 7. Evaluation of Proposals

NIH evaluates proposals received in response to the RFP from a technical standpoint, which includes the offerors' past performance on similar projects, and from a business standpoint. The RFP specifies the relative importance of the technical aspects of the proposal versus the cost or price, past performance and socioeconomic program participation.

### a. Technical Evaluation of Proposals and Establishing a Competitive Range

Persons who have expertise in the solicitation's particular field will evaluate proposals professionally and objectively. For R&D and nonR&D requirements, one or more panels in the scientific or technical disciplines associated with the contract requirements perform the technical evaluation. At least three-fourths of the members of the peer review group are nonFederal employees for R&D requirements. For nonR&D requirements, persons within the Federal Government who have expertise in that particular field may serve on a committee to evaluate proposals. The technical evaluation is conducted solely based on the RFP's evaluation criteria and proposals receive either an acceptable or unacceptable rating.

After the technical evaluation, the contracting officer will establish a competitive range if discussions are to be conducted. The competitive range identifies those offerors with whom NIH

will conduct negotiations, and is composed of the most highly rated, technically acceptable proposals unless the range is further reduced for efficiency. However, the solicitation may state that the Government reserves the right to award without discussions. Therefore, the offeror's initial proposal should contain their best terms from a cost or price and technical standpoint.

#### **b. Discussions**

Once a competitive range has been established, the NIH Contracting Officer conducts discussions with the offerors determined to be in that "range". These discussions, either written or oral, will reveal to each offeror ambiguities, uncertainties, or any questions raised in the evaluation of its proposal. Questions affecting technical considerations, cost elements and administrative matters also may be discussed. Offerors then are given an opportunity to improve or revise their proposal in a Final Proposal Revision. This Final Proposal Revision is the basis for the award to the offeror considered most advantageous to the Government.

#### **c. Cost and Price Analysis of Proposals**

Technically acceptable proposals also are evaluated from a business standpoint. Cost analysis is the review of the individual cost elements and proposed profit, if any, by an evaluation of the offerors' cost or pricing information and of the judgmental factors applied by the offerors to the estimated costs. This is accomplished through verification and evaluation of each element of cost proposed by the offerors based on the audit and technical analysis performed by the various Government specialists.

Price analysis is the process of examining and evaluating a proposed price without evaluating its separate cost elements and proposed profit. Price analysis entails: (1) comparison of proposed prices received in response to the solicitation; (2) comparison of prior proposed prices and contract prices with current proposed prices for the same or similar items; (3) application of rough yardsticks to highlight significant inconsistencies that warrant additional pricing inquiry; (4) comparison with competitive published price lists; (5) published market prices of commodities; (6) similar indexes and discount or rebate arrangements; and (7) comparison of proposed prices with the independent Government cost estimate, and comparison of proposed prices with prices for the same or similar items obtained through market research. Price analysis always is used when employing negotiated fixed-price contracts. It also may be used when adequate price competition, as defined in FAR 15.403, exists to allow the Contracting Officer to determine price reasonableness.



#### **d. Award Announcements and Notifications to Unsuccessful Offerors**

Contract award notices are published in the FedBizOpps. Upon written request, unsuccessful offerors are debriefed and provided the basis for the selection decision and contract award.

Debriefing information also includes: the Government's evaluation of the significant weaknesses or deficiencies in the offeror's proposal; the overall evaluated cost or price and technical rating of the successful offeror and the debriefed offeror; the overall ranking of all offerors; a summary of the rationale for award; for acquisitions of commercial end items, the make and model of the item to be delivered by the successful offer; and reasonable responses to relevant questions on the agency's compliance with source selection procedures contained in the solicitation and acquisition regulations.

The Contracting Officer will notify each unsuccessful offeror at the earliest practicable time that its proposal is no longer being considered for award.

#### **8. Sealed Bid Procedures**

To use the sealed bidding process, the following conditions must be present: (1) time permits the solicitation, submission and evaluation of sealed bids; (2) the award will be made based on price and other price-related factors; (3) discussions with the responding offerors are not necessary; and (4) there is a reasonable expectation of receiving more than one sealed bid.

Preparation of an Invitation for Bid (IFB) is the next step. It describes the requirements of the Government clearly, accurately and completely. The IFB includes all documents (whether attached or incorporated by reference) furnished prospective bidders for the purpose of bidding.

The next step is publicizing the IFB. IFBs usually are publicized in the FedBizOpps, through distribution to prospective bidders and posting in public places. Publicizing occurs in sufficient time before public opening of bids to enable prospective bidders to prepare and submit bids.

Submitted bids are kept unopened in a locked bid box or other secure container until the time of public opening. Bidders must submit sealed bids to be received at the exact time and place stated in the solicitation. A late bid is not considered for award, unless one of the exemptions stated in FAR 14.304 applies.

The Bid Opening Officer publicly opens the bids, reads the bids aloud to those present and records the bids. Original bids are kept by the Government official but can be viewed by the public under Government supervision.

The Contracting Officer evaluates the bids for responsiveness, responsibility and reasonableness of price.

Responsiveness is achieved when the bids are submitted in a timely manner and prepared in accordance with the instructions outlined in the IFBs.

A bidder is determined responsible when it: (1) has adequate financial resources to perform the requirement or the ability to obtain them; (2) is able to comply with the required delivery or performance schedule, considering all existing commercial and governmental business commitments; (3) has a satisfactory performance record; (4) has a satisfactory record of integrity and business ethics; (5) has the necessary organization, experience accounting and operation controls, and technical skills, or the ability to obtain them; (6) has the necessary production, construction, and technical equipment and facilities or the ability to obtain them; and (7) is otherwise qualified and eligible to receive an award under applicable laws and regulations.

The contract is awarded after the Contracting Officer determines reasonableness of price and the most advantageous bid to the Government.

## **9. Unsolicited Proposals**

In addition to contract projects that are planned and developed by the NIH, unsolicited proposals also can be the basis for establishment of requirements to be obtained by contract. An unsolicited proposal is a voluntary written offer by a source outside the Government of new ideas and concepts that the NIH may find meritorious and useful to advance its mission. A valid unsolicited proposal must be innovative and unique and; independently originated and developed by the offeror. It also must be prepared without Government involvement and include sufficient detail to permit a determination that Government funding could be worthwhile and the proposed work could benefit NIH's mission. Based on these criteria, an evaluation of the proposal then will be performed by three or more experts, the majority of whom are not required to make recommendations on the contract action as part of their official duties.

An unsolicited proposal may be the basis for a Government competitive solicitation, if the RFP in no way reveals the original ideas or approaches of the originator. For example, an unsolicited proposal may represent one possible approach to a common problem. If there are other possible approaches to the problem, it may be in the Government's best interest to issue a competitive solicitation asking for technical approaches that offer the best solution to the problem. The competitive RFP would not specify or reveal the techniques described by the originator of any unsolicited proposal. When competition is deemed appropriate, despite the submission of an unsolicited proposal, the originator will be invited to participate under the formal competitive RFP.

## **10. Small Business Program**

The Small Business Act of 1958, as amended, and the Small Business Investment Act of 1958 reflects the declared policy of the Congress that small business concerns should receive a fair proportion of the Federal Government's contracts and purchases. It is the policy of the Federal Government to provide maximum practicable opportunities in its prime contracts and subcontracts to small business concerns.

The DHHS and all of its Operating Divisions implement this Federal socioeconomic policy through an established Small and Small/Disadvantaged Business Utilization Program. Each

DHHS Operating Division, including the NIH, has a small business program intended to aid, counsel and assist small business.

The Small Business Program at the NIH is headed by the Chief, Small Business Office and is centrally located in the Office of Acquisition Management and Policy. Two of the NIH Institutes, the National Cancer Institute and the National Institute of Environmental Health Sciences, also employ a Small Business Specialist who is responsible for day-to-day program operations. The Small Business Specialists are responsible for taking necessary action to ensure that small businesses are properly considered when reviewing Requests for Contracts and prime contractor's subcontracting plans, which establish goals to do business with small businesses. Small Business Specialists also counsel small businesses and engage in various outreach activities at the Federal, state and local community level.

The Small Business Administration (SBA), has authorized NIH to enter directly into contracts with eligible and certified small and disadvantaged businesses. Acquisitions (contracts and purchases) are offered to the 8(a) Program based on recommendations by agency Contracting Officers, Program Officials, Small Business Specialists, or as a result of requests from the SBA for firms in their portfolio.

The small business set-aside is a mechanism by which acquisitions (contracts and purchases) are reserved for the exclusive participation of small business concerns. Small business set-asides are initiated by Program Officials and Contracting Officers or recommended by the Small Business Specialist when there is a reasonable expectation of receiving at least two offers from responsible small business concerns, capable of providing the products at a fair market price.

Public Laws require that every contractor awarded contracts exceeding the simplified acquisition threshold must agree to subcontract with Small, Small Disadvantaged, Women, HUBZone and Veteran-owned businesses to the maximum extent practicable. Each contract with "other than a small business" anticipating subcontracting opportunities and which is expected to exceed \$500,000, or \$1,000,000 for construction must have an approved subcontracting plan for the particular contract prior to award. The goals established for Small, Small Disadvantaged, Women, HUBZone and Veteran-owned businesses must reflect a "good faith" effort to provide maximum practicable subcontract opportunities.

If the SBA has assigned a Procurement Center Representative to an agency, they become an independent part of the acquisition review process.

The NIH Small Business Office sponsors a small business seminar focusing on "How-To-Do Business" with the NIH generally on the first Wednesday of each month. Details can be obtained at its web site of <http://sbo.od.nih.gov/>.

Any of the Small Business Program Managers (see Appendix B) may be contacted for specific information concerning their programs.

## **11. The Small Business Innovation Research (SBIR) Program**

Public Law 106-554, the Small Business Reauthorization Act of 2000, requires the DHHS and certain other Federal agencies reserve a specified amount of their overall extramural R&D budgets for the SBIR Program. The purpose of this legislation is to stimulate technological innovation, encourage small business participation in Federal R&D, and increase small business commercialization of technological innovations derived from federally funded R&D.

For R&D efforts, a "small business" is a concern that is organized for profit, has its principal place of business in the United States, is not dominant in its field, and has no more than 500 employees. The SBIR projects are selected with a view to fulfilling broad program directives and solving priority technological problems and producing technology or products with commercial applications. Because these projects usually are highly scientific in nature, SBIR proposals are reviewed by a panel of scientists. At least three-fourths of the panel must be non-Federal employees and expert in the scientific field identified with the SBIR topic area.

The SBA maintains a web site that announces SBIR solicitations across all participating Government agencies at <http://www.sba.gov/sbir/indexprograms-otaagency.html> . Additional information on the NIH SBIR Program can be sought at <http://grants.nih.gov/grants/funding/sbir.htm#sbir/> .

## **12. NIH Acquisition Policies**

Within the limits of statutes and regulations governing the acquisition process in Federal Agencies, there is an opportunity for innovation to improve acquisition procedures and relations between the contracting parties. Views from the community at large on ways of enhancing the quality and effectiveness of our acquisition programs and procedures are welcomed and encouraged. Direct specific questions regarding the acquisition programs to the offices listed in Appendix A.

## **Appendix A**

### **NIH Contracting Offices**

**Office of Acquisition Management Policy, Office of Administration (OAMP/OA)**

Head of the Contracting Activity and

Director, OAMP/OA

RM 6D01

6100 Executive Blvd., MSC 7540

Bethesda, MD 20892-7540

Phone: (301) 496-4422

<http://ocm.od.nih.gov>

**National Cancer Institute (NCI)**

Research Contracts Branch and Acquisition Branch

Executive Plaza South, RM 604-B

6120 Executive Blvd., MSC 7222

Bethesda, MD 20892-7222

Phone: (301) 496-8628

And

**National Cancer Institute - Frederick Cancer Research and Development Center**

(NCI-FCRDC)

BLDG 427 RM 25

Fort Detrick

PO Box B

Frederick, MD 21702-1201

Phone: (301) 846-1113

<http://www.nci.nih.gov>

**National Heart, Lung, and Blood Institute (NHLBI)**

Contracts Operations Branch

Rockledge Bldg., (RKL2), RM 6100

6701 Rockledge Drive, MSC 7902

Bethesda, MD 20892-7902

Phone: (301) 435-0330

<http://www.nhlbi.nih.gov>

**National Institute of Allergy and Infectious Diseases (NIAID)**

Contract Management Branch

6700-B Rockledge Drive, RM 2230, MSC 7610

Bethesda, MD 20892-7610

Phone: (301) 496-0612

And

Acquisitions Management and Operations Branch  
Negotiated Contracts Section  
6700-B Rockledge Drive, RM 1130, MSC 7612  
Bethesda, MD 20892-7612  
Phone: (301) 402-2284  
<http://www.niaid.nih.gov>

**National Institute of Environmental Health Sciences (NIEHS)**

Research Contracts Branch  
PO Box 12874  
Research Triangle Park, NC 27709  
Phone: (919) 541-4670

And

Acquisitions Management Branch, OM  
PO Box 12874, MD NH-02  
Research Triangle Park, NC 27709  
Phone: (919) 541-5415  
<http://www.niehs.nih.gov>

**National Institute of Child Health and Human Development (NICHD)**

Contracts Management Branch  
RM 7A07  
6100 Executive Blvd., MSC 7510  
Bethesda, MD 20892-7510  
Phone: (301) 496-4611  
<http://www.nichd.nih.gov>

**National Library of Medicine (NLM)**

Office of Acquisitions Management  
BLDG 38A/ RM B1N17  
8600 Rockville Pike, MSC 6075  
Bethesda, MD 20894-6075  
Phone: (301) 496-6546  
<http://www.nlm.nih.gov>

**National Institute of Arthritis and Musculoskeletal, and Skin Diseases (NIAMS)**

Contracts Management Branch, EP  
One Democracy Plaza.  
6701 Democracy Blvd., STE. 800, MSC 4872  
Bethesda, MD 20892-4872

Phone: (301) 594-2543  
<http://www.niams.nih.gov>

**National Institute of Diabetes, and Digestive and Kidney Diseases (NIDDK)**

Acquisition Management Branch  
RM 781  
Democracy Plaza 2, MSC 6600  
Bethesda, MD 20892-6600  
Phone: (301) 594-7728  
<http://www.niddk.nih.gov>

**National Institute of Neurological Disorders and Stroke (NINDS)**

Contracts Management Branch, DEA  
6001 Executive Blvd., RM 3287, MSC 9531  
Bethesda, MD 20892-9531  
Phone: (301) 496-1813  
<http://www.ninds.nih.gov>

**National Institute of Dental and Craniofacial Research (NIDCR)**

Contracts Management Section  
Natcher Bldg., RM 4AN-44D  
45 Center Drive, MSC 6402  
Bethesda, MD 20892-6402  
Phone: (301) 594-0652  
<http://www.nidcr.nih.gov>

**National Institute of Mental Health (NIMH)**

Contract Management Branch, ORM  
6001 Executive Blvd., RM 6S-6107, MSC 9603  
Bethesda, MD 20892-9603  
Phone: (301) 443-2696  
<http://www.nimh.nih.gov>

**National Institute on Alcohol Abuse and Alcoholism (NIAAA)**

Contracts Management Branch  
Willco Bldg., STE 504  
6000 Executive Blvd., MSC 7003  
Bethesda, MD 20892-7003  
Phone: (301) 443-1191  
<http://www.niaaa.nih.gov>

**National Institute on Drug Abuse (NIDA)**

Contracts Management Branch  
6001 Executive Blvd., RM 3105, MSC 9543  
Bethesda, MD 20892-9543  
Phone: (301) 443-6677  
<http://www.nida.nih.gov>

**Division of Station Support Acquisition (DSSA)**

Office of Logistics and Acquisition Operations (OLAO)  
Office of Administration  
RM 637  
6011 Executive Blvd., MSC 7670  
Bethesda, MD 20892-7670  
Phone: (301) 496-7448  
<http://oa.od.nih.gov/olao/index.html>

And

**Division of Research Acquisition (DRA)**

Office of Logistics and Acquisition Operations (OLAO)  
Office of Administration  
RM 6E01  
6100 Executive Blvd., MSC 7540  
Bethesda, MD 20892-7540  
Phone: (301) 496-4487  
<http://ocm.od.nih.gov/drc.htm>

**Office of Purchasing and Contracts**

Clinical Center Acquisition Management  
RM 1N226  
10 Center Drive, MSC 1189  
Bethesda, MD 20892-7058  
Phone: (301) 402-1433  
<http://www.cc.nih.gov>

**Office of Research Services**

Construction Contracts  
BLDG 13, RM G-800  
9000 Rockville Pike  
Bethesda, MD 20892-5711  
Phone: (301) 435-4322  
<http://www.nih.gov/od/ors>



**National Institutes of Health  
Division of Information Technology Acquisition  
And Assessment Center (NITAAC)**

6011 Executive Blvd.

RM 625J

Bethesda, MD 20892-7670

Phone: (301) 402-2902

<http://nitaac.nih.gov/>

## **Appendix B**

Small Business concerns may wish to contact one of the following offices about contracting opportunities at the NIH:

### **National Institutes of Health**

#### **Small Business Office**

Office of Acquisition Management and Policy

RM 6D05

6100 Executive Blvd., MSC 7540

Bethesda, MD 20892-7540

Phone: (301) 496-9639

<http://sbo.od.nih.gov>

### **National Cancer Institute**

#### **Small Business Office**

Executive Plaza South, RM 608H

6120 Executive Blvd., MSC 7222

Bethesda, MD 20892-7222

Phone: (301) 496-8628

[bowej@rcb.nci.nih.gov](mailto:bowej@rcb.nci.nih.gov)

### **National Institute of Environmental Health Sciences**

#### **Small Business Office**

PO Box 12874

Research Triangle Park, NC 27709

Phone: (919) 541-0423

[workman@niehs.nih.gov](mailto:workman@niehs.nih.gov)